417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 PAX (904) 222-1222

CONFIRMED

APPROVED

CK No. .

				C.C. FEE. DISDUING	ED
			Capital Express		
NAME			Art. of Ino. File		
			Corp. Record Senrah		
			Lid. Portnorable File	•	
ADDRESS _			Eorolgn Corp. File		
			() Cort. Copy(s)	·	
PHONE ()		"	Art. of Amond, Filo	·	
/ /		· · · · · · · · · · · · · · · · · · ·	Dissolution/Withdrawal		
			CUS		
Sorvica: Top Priority	Ragular		Fictitious Name File		_
One Day Service	Two Day Borvico			<u> </u>	ī
To us via	Datum ula		——— Namo Reservation ~12	2/16/9601016020~	
TO US VIU	riotorn viu		Annual Repert/Reinstatement **	**122.50 ****122.50	J
Matter No.:	Express Mail !	vo. ————	Document Filing		
Slate Fee \$	Our		Corporate Kit	· 	
Jimo i du 4	Our #		Vohicle Search		—
			Driving Record	, (
			Document Retrieval	78 10	—
					_
			UCC 1 or 3 File	本語	
			UCC 11 Search	到到 in	_
			UCC 11 Retrieval	85 6 F	_
			File No.'s,Coples	<u> </u>	
			Courier Service	7 2 0	
			Shipping/Handling	G= ω	_
			Phone ()	<u> </u>	_
			Top Priority	Eri on	_
			Express Mail Prep.		_
	,		FAX () pgs.	<u></u>	
					_
			SUBTOTALS		
			FEE	2	_
			FSG::::::::::::::::::::::::::::::::::::	143	
		_	DISBURSED		
	(0 0)	,)	SURCHARGE	TO STORY	_
			747 00 00000000000000000000000000000000	1 69 9	**
	\	<i>.</i>	TAX on corporate supplies,		
EQUEST TAKEN	CONFIRMED	APPROVED	SUBTOTAL	\$	

Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Pasi Due Amounts Pasi 30 Days, 18% per Annum.

PREPAID.....

BALANCE DUE.....

THANK YOU from Your Capital Connection

11-2529-7 PONDER'S INC., THOMASVILLE, GA.

11:00

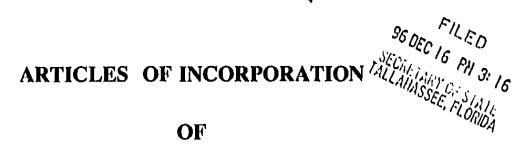
REQUEST

TIME

WALK-IN

Will Pick Up

ВУ



DAYEDWARDS, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is DAYEDWARDS, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 604 Sweetwater Blvd. North, Longwood, FL 32779.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$10.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Hiromi Edwards, 604 Sweetwater Blvd. North, Longwood, FL 32779.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is

Hiromi Edwards, Director/Vice-President, 604 Sweetwater Blvd. North, Longwood, FL 32779.

Setsuko Day, Director/Pres., 7550 Hinson St. Apt. 7C, Orlando, FL 32819.

ARTICLE VII: SPECIAL PROVISION

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 16th day of December 1996.

"Capital Connection, Inc. by Kim Crosson, Office Manager"

Am Crosson

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida, Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.	The	namo	o f	the	corpora	ı t L on	is:_	Dλ	YEDWAR	DS. I	NC.	
						<u></u>	<u> </u>	<u>. </u>	-, <u>, , , , , , , , , , , , , , , , , , </u>	,		
					reet ad				-		=	
		I	ong	boow	, FL 327	779						
	,			"				- · ·	·			

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Home Edwards

Hiromi Edwards